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Important statistics related to drowning and near-drowning incidents

☛ Drowning is the second leading cause of injury-related death among children under the age of 15.

☛ Between 60% and 90% of drowning among children aged 0 to 4 occur in residential pools; more than half of those are at the child's home.

☛ Children under the age of 1 most often drown in bathtubs, buckets, and toilets.

☛ Children between the ages of 1 and 4 most often drown in swimming pools, hot tubs, and spas.

☛ Most drowning incidents involve children ages 1 to 4 are silent immersions (no screams, or splashing heard).

☛ People between the ages of 5 and 19 most often drown in pools, lakes, ponds, and rivers.

☛ Alcohol use is involved in up to 50% of adolescent and adult deaths associated with water recreation.

☛ 19% of child drowning deaths occur in public pools with lifeguards present.

☛ 15% of drowning deaths are "dry" in which no water enters the lungs due to laryngeal spasm.

☛ For every child who drowns, four others are hospitalized for near-drowning.

☛ One-third of near-drowning pediatric victims who are comatose on hospital admission will suffer significant neurologic damage.



Submersion incidents will inevitably rise with the mercury.

REFERENCE:

Lanier, Jim: National Journal of Emergency Dispatch, Summer 2006, Vol. 8, NO. 3, pg. 27

Trivia Time:

Q: Why does renal failure more commonly occur with fresh water near-drowning than salt water near-drowning?

A: During a fresh water near-drowning, the fluid aspirated is hypotonic relative to blood. Therefore red blood cell lysis occurs, which can lead to hemoglobinuria and acute renal failure.

Q: What is "immersion syndrome"?

A: Immersion syndrome is sudden death which occurs after submersion in very cold water. Death is likely due to dysrhythmia.

Have any trivia questions you would like the answer researched and then reported please feel free to submit them by e-mailing: lorie.holtmeier@dhss.mo.gov If your question is chosen, your name will be published in the next newsletter with your Q & A.

Pool Safety for Children:

- Never leave a child alone in or near a pool, even for a moment.
- Keep rescue equipment (such as a shepherd's hook) and a phone by the pool.
- Stay within an arms length of the child at all times.
- Remove all toys from the pool after use so children aren't tempted to reach in after them.
- Remember teaching your child to swim **DOES NOT** mean your child is safe in the water.

Age Requirements for National Registry

The National Registry of EMT's requires all applicants to be at least 18 years of age. Likewise, Missouri Emergency Medical Services Association (MEMSA), has a policy that applicants for the EMT-Basic practical be at least 18 years of age.

The National Registry discourages underage applicants from testing since they have no mechanism for tracking an exam and holding it for grading until the applicant turns 18. The initial certification period would be less than two years due to



the period beginning from the date the test was graded. With this practice in place there is no benefit from testing early. It is also within the rights of the National Registry of EMT's rights to invalidate the test of anyone who does not meet their requirements.

If you have students who are not 18, there are three issues to be considered:

1. If MEMSA does not allow a student to complete the practical test until they are 18, the student has two years from the course completion to practical and written examination. Practical test results are only good for one year, after that time the practical must be repeated.
2. The National Registry will not certify an applicant after two years past course completion.
3. Underage students also may be occupying a seat for an exam while someone who is eligible has to wait.

All of the above points must be considered when conducting programs that accept students that are under 18 years of age.

Someone you should know:

The someone you should know this newsletter is the newest EMS Inspector I for the Unit of EMS. Shirley Gastler made the decision to join the staff in March of 2006.

Shirley has been in the EMS field since 1989, when she became an Emergency Medical Technician-Paramedic. Shirley completed her training at Kirksville VoTech, and accepted her first job as an EMT-P with Scotland County Ambulance.

Shirley comes to the Unit of EMS with a wealth of practical experience and knowledge. She was a flight medic for nine years and climbed the clinical ladder to become a supervisor for University of Missouri Hospital from 2001–2004.

Shirley is also an instructor verified in ACLS, PALS, BLS, and PHTLS, as well as being an active member of "Think First MO"

and the SAFE KIDS Coalition.

Shirley is married with two sons, and resides in Columbia with her husband. Welcome Shirley and wishing you many years of happiness with the Unit of Emergency Medical Services.

If you know someone the EMS community should get to know, e-mail their story to us at

lorie.holtmeier@dhss.mo.gov

**The Unit of
Emergency
Medical Services
welcomes Shirley
Gastler as EMS
inspector.**

Licensure Actions:

The licensure actions for April through July, 2006 included:

3 Denials of licensure, 5 Settlement agreements for expired licenses, 5 Letters of warning to ambulance services, and one settlement agreement with Rebekah Cranfield.

2 Revocations of licenses:

Aimee Sloan, P-14335, 190.165.2 (5), (6), and (12) RSMO and 19 CSR30-40.365 (2)(E), (F), and (L). Actions involved gross negligence, incompetence, misconduct, dishonesty, misrepresentation and a violation of professional trust or confidence. Also subject to discipline for giving medication without a doc-

tor's order or authority under the district's protocol, in violation of 190.142 RSMO.

Michael Moore, P-14093, Mr. Moore pled guilty to the charge of felonious domestic abuse against his former spouse, blaming his actions on his willful and deliberate abuse of a psychotropic drug.



Are You Ready?

Emergencies can strike anytime. A tornado, a flood or even a terrorist attack can change lives. Missouri families, communities, businesses and schools need to take steps today to prepare for an emergency. Preparing today can save lives.

Ready in 3 can help! Ready in 3 is a program intended to assist Missourians to be fully prepared for an emergency event whether at home, in the car, at work or school. The program takes families step by step through a simple process to ensure that all the bases are covered in the event of a real emergency.

The Department of Health and Senior Services has created 3 simple steps: 1—Create a Plan, 2—Prepare a kit, 3—Listen for information. This plan has been endorsed by the American Red Cross and the State Emergency Management Agency.

To access the plan simply go to the Department of Health and Senior Services web site at www.dhss.mo.gov/Ready_in_3.

Family plans are available in English, Spanish, Bosnian and



Braille, and outline the items that should be included in your emergency plan.

It is important to stay calm in an emergency. Get as much information about the event as possible. If there is no electricity, make sure to have a battery operated radio so you can listen for updates and instructions.

City, county and state officials have developed emergency plans. In the event of an actual emergency, it's important to follow their instructions and advice. They will provide you with the latest information.

Licensure Information

Much of the EMS community is aware that with the passage of Senate Bill 177 in May of 2005, that EMT-Bs and EMT-Ps will have to pay a fee to maintain their license in the state of Missouri. In the near future, the Unit of Emergency Medical Services will begin collecting fees for licenses. With this change on the horizon necessary attention will need to be given to the date of your license expiration and how timely your application for renewal comes into the office.

19 CSR 30-40.342 (1) (A) states, "An applicant for relicensure must submit their application no less than thirty (30) days or no more than one hundred twenty (120) days prior to the expiration date of their current license."

What does this mean? With the collection of fees to begin, it will be important to comply with the above regulation due the process now including processing of the fee. This additional step will mean a longer turn around time for your license to be processed.

It is important to also know that you may not work in the capacity of EMT-B or EMT-P once your license expires without exception, until your new license has been received by you via mail. Once your license expires, if you continue to work, not only are you subject to disciplinary action, but the service you work for is subject to investigation and can include repercussions related to Medicaid/Medicare reimbursement.

Another word to the wise, if you allow your National Registry card to expire prior to completing the appropriate initial application for your Missouri license, you may not be able to license in Missouri without completion of a lengthy process. **19 CSR**

30-40.342 (2)(A) & (3)(A) states, "The applicant for initial licensure shall submit with their license application to the Bureau of EMS evidence of current certification with the National Registry of EMTs as an EMT-B, EMT-I, or EMT-P. This means that if you complete your course and sit for the National Registry Practical and Written exams and pass, and you do not apply for your Missouri State license within two years and allow your National Registry card to become more than two years expired, you will not be able to gain a Missouri State license until the following requirements are met:

If your National Registry expires and it has been more than two years in order to obtain a Missouri State license as an EMT-B, you will need to complete an entire new EMT-B course and sit for the written and practical exams again.

If you are an EMT-P, you will need to complete a paramedic refresher course, have current ACLS, and PHTLS or BLS certifications and you are eligible to retake the National Registry practical and written exams.

Background checks are also required for initial and renewal licensure. Background checks must be current (within the last 30 days), and if you have lived in any other state than Missouri, you will need a background check from each state you have lived in for the last five years.

In Missouri, a state background check can be obtained through the Missouri Highway Patrol at 1510 E. Elm St, Jefferson City. The fee is \$5 and will take approximately 15 minutes. You can mail your information to the Highway Patrol or use MO Criminal Record LLC, just log onto mocriminalrecords.

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**Safety.....It's a
people thing!**

We're on the Web
www.dhss.mo.gov/EMS



**Department of
Health and Senior
Services**

EMS Stateside is a newsletter providing Emergency Medical Services personnel for the State of Missouri with informative and educational articles, updates, announcements and resources of current interest.

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Image Trend Update

Image Trend, Inc. of Lakeville, MN was selected in 2004 for the venture of development of the Missouri Ambulance Reporting System (MARS) <http://emsweb1.dhss.mo.gov/MARS/>. This system collects data from 67.8% of the 230 ambulance services in Missouri for a total of over 60,000 emergency incidents. This information includes response times, patient condition, and history as well as procedures performed and seat belt usage. The information collected has been instrumental in improving training of personnel as well as justifying onboard ambulance equipment, since statistics have proven that quicker responses do save lives.

The success of this project has led to the selection of Image Trend to provide other solutions for emergency data needs. The Trauma Bridge, which tracks trauma incidents, patients, procedural and outcome data in the hospital emergency room has been recently deployed and will be a first of its kind in the United States. It will allow for the complete tracking of all events involved in trauma incidents from the 911 call to the eventual outcome.

With the upcoming implementation of Missouri as a pilot state for BioSense®, Image Trend will begin to collaborate with the Unit of Emergency Medical Services and Center for Emergency Response and Terrorism to ensure that syn-

dromic surveillance information is tracked to allow the state to not only foresee, but plan for and intervene in potential cluster activity that may indicate threats to the safety and security of Missourians.

These systems will not only provide the state level administrators and agencies access to more information faster, but through their "anywhere, anytime availability", even rural areas will be serviced and receive benefits. Full public service in any emergency at any time.

Missouri's goal for you.



**"Image Trend setting the trend for
Emergency Medical Services in Missouri"**